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FORM 3X

Office

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FE7AN014

## REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FEC MAIL CENTER

2016 FEB 10 PM 12: 21

**FEC FORM 3X** 

Rev. 12/2004

Office Use Only

1. NAME OF COMMITTEE (in full)	TYPE OR PRINT		nple: If typing, type the lines.	12FE4M5	
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than previously reported. (ACC)	lami itimi	tini I I I		[A,R] [7,2,1]	311-
2. FEC IDENTIFICATION NU	MBER ▼	CITY A		STATE ▲	ZIP CODE A
C0057445	5 9	3. IS THIS REPORT	NEW (N) OR	AMENDED (A)	
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:	(b) Monthly Report Due On:	Feb 20 (M2)  Mar 20 (M3)  Apr 20 (M4)	May 20 (M5)  Jul 20 (M7)		Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE)
April 15 Quarterly Report (Q  July 15 Quarterly Report (Q  October 15 Quarterly Report (Q	(c) 12-Day PRE-E Report	2.0	Primary (12P)  Convention (12C)	General (12G)  Special (12S)	Runoff (12R)
January 31 Year-End Report (Y	E)	Election on		ka aseran iyad	State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	POST-	Election to the:	General (30G)	Runoff (30R)	Special (30S)
Termination Report (TER)		Election on	MUM / TO DO /		in the State of
	3.6			31 20	
I certify that I have examined the		he best of my kno Relerts	-	rue, correct and comple	ete.
Type or Print Name of Treasurer  Signature of Treasurer	cul ar	neser 1		Date 0 2 0	2 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2 FEC Form 3X (Rev. 02/2003) Write or Type Committee Name Red Association THE THE PROPERTY OF THE PROPER 06 70 2015 Report Covering the Period: From: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand January 1, (b) Cash on Hand at 11,050,00 Beginning of Reporting Period..... (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and والمعارض والمعارض للبراء وهيا وإلا لمفتر بحاري وتركي والمروودي 6(c) for Column A and Lines 11,050.00 1,050.0.0 6(a) and 6(c) for Column B)..... 1,2,7,7 7. Total Disbursements (from Line 31)......... Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ..... This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW

> Toll Free 800-424-9530 Local 202-694-1100

> Washington, DC 20463

Write or Type Committee Name

FEC Form 3X (Rev. 06/2004)

Report Covering the Period: From: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)...... (ii) Unitemized ..... (iii) TOTAL (add Lines 11(a)(i) and (ii)...... (b) Political Party Committees ..... (c) Other Political Committees (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ..... 12. Transfers From Affiliated/Other Party Committees..... 13. All Loans Received ...... 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 17. Other Federal Receipts (Dividends, Interest, etc.)..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3)..... (b) Levin Funds (from Schedule H5) ....... (c) Total Transfers (add 18(a) and 18(b))... 19. Total Receipts (add Lines 11(d); 12, 13, 14, 15, 16, 17, and 18(c))........▶ 20. Total Federal Receipts (subtract Line 18(c) from Line 19).......▶

## **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A	COLUMN B
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	Total This Period	Calendar Year-to-Date
	(i) Federal Share	headenstandinglessification in the second	landredredredredredredredre de Wedled
	(ii) Non-Federal Share	1.2.7.7	land and addition was backlined and the second
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23.	Contributions to Federal Candidates/Committees	the second secon	Legislanding strange and the strange of the strange
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28.	Refunds of Contributions To: (a) Individuals/Persons Other	And the state of t	र्वे स्वयं क्षित्रकारी कार्या के स्वयं क्षित्रकार क्षित्रकार क्षित्रकार क्षित्रकार क्षित्रकार क्षित्रकार क्षित इस तकार क्षित्रकार क्षित्रकार क्षित्रकार क्षित्रकार क्षित्रकार क्षित्रकार क्ष्यं क्षात्रकार क्षात्रकार क्षात्र
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	(d) Total Contribution Refunds	Banas demonstration of the second control of the second control of the second control of the second control of	ika madimungi sandang sakang kanang kinang kinang kanang sandang sa
	(add Lines 28(a), (b), and (c))▶	made control to the state of th	oo o
		Control of the second s	t and the second course of the
29.	Other Disbursements	les de la company de la compan	000
30.	Federal Election Activity (52 U.S.C. § 30101)	(20))	
	(a) Allocated Federal Election Activity	•	
	(from Schedule H6)	Antenin market grant de marille sandre sa de marile mande marile mande	Hammittensellmandismakanskramthamitensellmankensellmank
	(i) Federal Share		Revelopment Marchaelle Revelopment Construction
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	(ii) "Levin" Share	Employment to a color with the color of the	
	(b) Federal Election Activity Paid Entirely	to the section of the advantage of the section of t	॥ विकासको कर्त्रसामिकाको प्रकार क्षेत्रका क्षेत्रसामिका क्षेत्रमा क्षेत्रमा क्षेत्रमा क्षेत्रमा क्षेत्रमा क्षेत्र
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	(c) Total Federal Election Activity (add	langua di mana di mana Na mana di man	Benerit medican der medican der medican der medican selection de la medican de la medi
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶		
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	1277	12.7.7
32.	Total Federal Disbursements .	•	
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### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans)	energesen sineg one energenmy sommanleger en in besom	कर सर्वेश्वर १४ , रूपके हैं । यह १८५० के प्रकार के प्राची है कर है । विद्यालय है । यह साम के
(from Line 11(d), page 3)		oo
34. Total Contribution Refunds	্বিক্রার প্রশাস্থ্য নিজ্ঞ এই মুক্ত কর্মেক্রান্ত্রনার ১৮ প্রশাস স্থাপ ও প্রক্রান্ত্রনার । বিশ্ব	्राप्त्रकार द्वारा राष्ट्र साम्बन्धिक स्थानक बाँगा व्याप्त सेर्ट्या चेरावह केरा व स्थानहीं सेर्वाह
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35. Net Contributions (other than loans)	्रकृतियो प्राप्त रहे । हिन्दा स्वापित अध्यतिकश्चित्रपूर्वा विष्यकर्ति है	के प्रेमण कर किस्सु गरिस्तु है। इस की किस्सु के प्राप्तिक प्राप्तिक है। यह सिर्मा
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36. Total Federal Operating Expenditures	Status region : a subsequencia such acres to commendate transfer of the commendate o	la carrier de la collècie de la coll
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(from Line 15, page 3)	12.7.7	South as a weather work of the limited of Friends
38. Net Operating Expenditures	halo of Primarity 1277	The transfer of manufaction of the first transfer of the form best
(subtract Line 37 from Line 36)	1277	

## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE OF i Use separate schedule(s) for each category of the (check only one)

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HEDULE B (FEC Form 3X)    Ilse separate schedule(s)   FOR LINE NUMBER: PAGE / OF			
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	27	28a 28b 28c 29 30b
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NAME OF COMMITTEE (In Full)			
Ackaisas Ned Stat	e Association		
Full Name (Last, First, Middle Initial)			Date of Disbursement
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TOTAL This Period (last page this line number only	/)		g var at la little at the discount of the late of the

## SCHEDULE C (FEC Form 3X) LOANS

DANS		Use separate schedule( for each category of the Detailed Summary Page	e
AME OF COMMITTEE (In Full)		Detailed Sulfilliary Page	
AKANSAS Ned S.	Late Assoc	ciation	
LOAN SOURCE Full Name (Last, First, Mic			Election: Primary General
Mailing Address			Other (specify) ▼
City	State ZIP C	ode	
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Date Incurred	Date Due	Anna Andrews	The state of the s
List All Endorsers or Guarantors (if any) t			
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Guaranteed 1	स्यानुस्त्रानुस्त्रात्वात् । अस्ति स्वति स्वति सुरुष्य पुरुष्य । स्वति स्वति स्वति स्वति स्वति स्वति स्वति स्वति । स्वति स्वति स्वति स्वति स्वति ।
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Mailing Address		Occupation	
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3. Full Name (Last, First, Middle Initial)		Name of Employer	
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TOTALS This Period (last page in this line only	y)		त्राहर । अस्त्रात्त्रास्त्रात्त्रात्त्रात्त्रात्त्रात्त्रात्त्रात्त्रात्त्रात्त्रात्त्रात्त्रात्त्रात्त्रात्त् ही वर्षेत्रवर्ण्यास्त्रात्त्रात्त्रात्त्रात्त्रात्त्रात्त्रात्त्रात्त्रात्त्रात्त्रात्त्रात्त्रात्त्रात्त्रात्त्
Carry outstanding balance only to LINE 3, Sc	hedule D, for this line.	If no Schedule D, carry fo	rward to appropriate line of Summary.

## SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supple	men	tary for
Inform	ation	found on
Page_	1	of Schedule

ederal Election Commission, Washington, D.C. 20403			
NAME OF COMMITTEE (In Full)		FEC	IDENTIFICATION NUMBER
Arkmsas Ned State As	ssociation	C	00574459
LENDING INSTITUTION (LENDER)	Amount of Loan		Interest Rate (APR)
Full Name	Mone	ాగా కార్యాల్లు కార్యాలు కార్మాలు	1 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
Mailing Address	Date Incurred or Established		
City State Zip Code	Date Due		
A. Has loan been restructured? No Yes	If yes, date originally incurre	d :	
B. If line of credit,  Amount of this Draw:	Polonos		a et emplo e et ergo e ego g Bronsens der oms dette de e
C. Are other parties secondarily liable for the debt incurred No Yes (Endorsers and guarantors mu	ed? ust be reported on Schedule C.)		
D. Are any of the following pledged as collateral for the property, goods, negotiable instruments, certificates of stocks, accounts receivable, cash on deposit, or other  No Yes If yes, specify:	deposit, chattel papers,		e value of this collateral?  ender have a perfected security t? No Yes
E. Are any future contributions or future receipts of interes	est income, pledged as		e estimated value?
collateral for the loan? No Yes If yes, s	, -		r estimated value r
			i Kantan 1≇ rena der Kradwar
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Location of account:		
Date account established:	Address:		
M M M / Y D D / Y Y Y Y Y	City State 7in:		
The street Constitution Constitution and	City, State, Zip:		
F. If neither of the types of collateral described above wa the loan amount, state the basis upon which this loan	as pledged for this loan, or if the was made and the basis on w	amount plec hich it assure	dged does not equal or exceed es repayment.
G. COMMITTEE TREASURER		DATE	
Typed Name		M M	A CONTRACTOR OF A CONTRACTOR O
Signature		1	t de la de la companya de la company
H. Attach a signed copy of the loan agreement.			
TO BE SIGNED BY THE LENDING INSTITUTION:     To the best of this institution's knowledge, the teare accurate as stated above.     The loan was made on terms and conditions (in similar extensions of credit to other borrowers of this institution is aware of the requirement that complied with the requirements set forth at 11.00.	ncluding interest rate) no more for f comparable credit worthiness. a loan must be made on a bas	avorable at this which assi	ne time than those imposed for ures repayment, and has
AUTHORIZED REPRESENTATIVE	<del></del>	DATE	
Typed Name Signature		i ii ii ii	CATEGORY AND VINE OF THE
	tle	→	

## SCHEDULE D (FEC Form 3X) **DEBTS AND OBLIGATIONS**

(Use separate schedule(s)

PAGE OF FOR LINE NUMBER:

xcluding Loans	for each (check only one) 9 numbered line) 10
NAME OF COMMITTEE (In Full)	
Mr. insas Ned State Assoc	iation
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
	none
Mailing Address	
City State Zip Code	
Outstanding Balance Beginning This Period	
Secretary Complete Comment & Secretary Early Secretary	nt This Period Outstanding Balance at Close of This Period
Some the suite of the suite of the second section of the secti	أنكيو بالمساخ معالمين البرزع مران والمسيرفية والاستكال أرما أدرجة معارك للمريجة فالأراران
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	
	Outstanding Balance at Close of This Period
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State	Zip Code
Outstanding Balance Beginning This Period	······································
	ent This Period Outstanding Balance at Close of This Period
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1) SUBTOTALS This Period This Page (optional)	
2) TOTALS This Period (last page this line number only)	The same of design and the same of the sam
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only	the control of the co
4) ADD 2) and 3) and carry forward to appropriate line of Summary	

## SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

LIMILLE MADEF LINDENT LA LINDINGTO		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Arkansas Ned State Asso	ciation	C00574459
	rt Amends report fil	ed on in the second of the sec
Full Name of Payee		Date of Public Distribution/Dissemination
Mailing Address		Amount
City State	Zip Code	general de la comparazione della
Purpose of Expenditure	Category/ Type	
Name of Federal Candidate		ffice Sought: House District:
Calendar Year-To-Date Per Election for Office Sought	Di	President   Senate State:    Senate State:    General   Genera
Full Name of Payee	alternation and an experience of the second	Date of Public Distribution/Dissemination
Mailing Address	·····	M M / B D D / V V V
		Amount  - Might such a such as a suc
City State	Zip Code	Date of Dichursement or Obligation
Purpose of Expenditure	Category/ Type	-   "" " / " " / " "
Name of Federal Candidate	Support O	Office Sought: House District:
Calendar Year-To-Date Per Election for Office Sought	OTTANTA PAR - D	Disbursement For: Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		a cense view je je jednesti stanie i se i
(b) SUBTOTAL of Unitermized Independent Expenditures		and the second of the second second second of
(c) TOTAL Independent Expenditures		g sagawa ji saga sawaka ja siya a gwisiya a ji saya a fi g Sawa samana akkawa a sa ilawa a sama a sa a saya
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.	•	· · · · · · · · · · · · · · · · · · ·
	Date ·	TM TM ( ) D > DT ( ) > YT YT YT YT Y TY TY TY TY TY TY TY TY T
Signature	- 54.5	han in the second of the street

## SCHEDULE F (FEC Form 3X) ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S) ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE

(To t	be used only	by Political Con	nmittees in the Ge	eneral Election)	FOR LINE 25	OF FORM 3X
AME OF COMMITTEE (In Full)	<del></del>		<del></del>	<del></del>	* Che	ck if
Arkansas Red	State		ciation			nour notice
as your committee been designated to mal		Full Name of Su	bordinate Committe	30		
pordinated expenditures by a political party	committee?			Νe	110	
YES, name the designating committee:	}	Mailing Address				
	1					
		City		Sta	te ZIP	Code
Full Name (Last, First, Middle Initial) of	Each Payee			Purpose of Expe	enditure	- ··
						LENGT LANDS TWEET
Mailing Address		<del></del>				Category/ Type
				Date		
City	State	Zip Code	)	RE M /	Y 1 0	<u>.A</u> . A.
Name of Federal Candidate Supported	000-0				الدوية المنفاء فيلد	Language i
Ivanie or reueral Candidate Supported	Office Sough	t: House Senate	State:	_ Amount	ia amy og tag	ente e e e e e e e e e e e e e e e e e e
		Presidentia		- {		4
Aggregate General Election	Lagran La Casan		<del></del>	i in a second control of the	ada tabu	iii
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Full Name (Last, First, Middle Initial) of	Each Payee			Purpose of Exp	enditure	
<u></u>		<del> </del>		_		Category/
Mailing Address				Date		Туре
City	State	Zip Code	)	M M /	ס' ס' ע' פֿר	
Name of Federal Candidate Supported	Office Sough	t: House	State:			<u>Linux is turn</u>
	J 000gii	Senate	District:	Amount	Matth Tangan and 1915	gan ya kasa galan.
		Presidenti	al	<del>-</del>		i.
Aggregate General Election	யி சிழ்ச்சி சிழ்		्रा अनुसर्भ कर्म ४	To all size time the	saat ku saata d <b>i Pila</b> usa.	ន្ធ ( ±2ីដី) ខេត្ត 
Expenditure for this Candidate				Ì		
Full Name (Last, First, Middle Initial) of	Fach Pavee			Purpose of Exp	enditure	
Tarrio (Last, 1 list, Middle Initial) of	Lauri rayes			, a.poso o. Exp	ÇGILGI O	
						Category/
Mailing Address				<u> </u>		Туре
City	State	Zip Cod	<del></del>	Date	i ege i i i i i e	rational AF
Ony	Siaie	Zip Cod	5		9 / d d	YYY
Name of Federal Candidate Supported	Office Sough	nt: House	State:	<del></del>		- Cara ai
	•	Senate	District:	Amount	n postajnantua).	and the second
		Presidenti	al l	_		
Aggregate General Election	हात् । <del>ज</del> ्ञासम्बद्धाः	and the group of the	" " " " " " " " " " " " " " " " " "	A countractions of a section o	ಒಪ್ಪು ≌ ಪ್ರಚ <b>್</b> ಚಿಕ್ಕ	الأدام بمتائل بسادين
Expenditure for this Candidate ▶		్ ఎక్కిమిగ్నాయం				
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SUBTOTAL of Expenditures This Page (or	otional)		······	ر. الاستندارين ا	igan ki ta da da <b>k</b> ama l	
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PAGE

OF /

## SCHEDULE H1 (FEC Form 3X)

### METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)		
Arkansas Ned State Association USE ONLY ONE SECTION, A or B		
A. State and Local Party Committees  Fixed Percentage (select one)		
Presidential-Only Election Year (28% Federal)		
Presidential and Senate Election Year (36% Federal)		
Senate-Only Election Year (21% Federal)		
—— Non-Presidential and Non-Senate Election Year (15% Federal)		
B. Separate Segregated Funds and Nonconnected Committees  Flat Minimum Federal Percentage		
If the committee will allocate using the flat minimum percentage of 50% federal funds, check <b>or</b>		
If the committee is spending more than 50% federal funds, indicate ratio below		
Federal%		
Nonfederal%		
This ratio applies to (check all that apply):		
Administrative Generic Voter Drive Public Communications Referencing Party Only		

SCHEDULE H2	(FEC Form	3X)
ALLOCATION R	ATIOS	

LOCATION RATIOS		PAGE OF
ME OF COMMITTEE (In Full) Arkansas Ned State Associat	100	
TIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDA CTIVITIES APPEARING ON THIS REPORT.	TE SUPPORT	
ethods of allocation:		
<ol> <li>FUNDRAISING activities are allocated using the "funds received met expenses must equal the federal proportion of monies raised.</li> </ol>	hod" where the federal pro	portion of
II. Shared DIRECT CANDIDATE SUPPORT activities are allocated according where the federal proportion of disbursements is based on the benefitivity. For PACs Only: Direct candidate support includes public commenderal and nonfederal candidates, regardless of whether there is a large allocated using a time/space method.	fit derived by federal candic nunications or voter drives	lates from the ac- that refer to both
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS:    Fundraising   Direct Candidate Support	9	e september in the second of t
CHECK IF THE RATIO IS:  New Revised Same as Previously Reported		
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS:  Fundraising Direct Candidate Support  CHECK IF THE RATIO IS:  New Revised Same as Previously Reported	100 m	পুজৰ পুজনাত্ৰ কাৰ্য্য এই কাৰ্য্য ই অনুভাৱৰ কৰি কাৰ্য্যিক ইবিকাশ
ACTIVITY OR EVENT IDENTIFIER	FEDERAL OF	NONESDEDAL «
ACTIVITY IS:  Fundraising Direct Candidate Support  CHECK IF THE RATIO IS:  New Revised Same as Previously Reported	FEDERAL %	NONFEDERAL %
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS:  Fundraising Direct Candidate Support  CHECK IF THE RATIO IS:  New Revised Same as Previously Reported	1	NONFEDERAL 79  18 Figure - January - 1900 - 1900  10 Control Service (Service - 1900)  10 Control Service (Service - 1900)
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
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ACTIVITY OR EVENT IDENTIFIER	EEDERAL o/	NONEEDEDAL «/
ACTIVITY IS:  Fundraising Direct Candidate Support  CHECK IF THE RATIO IS:  New Revised Same as Previously Reported	FEDERAL %	NONFEDERAL %

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## SCHEDULE H3 (FEC Form 3X) TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

1	PAGE	= -	0	F		_
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	FOR	LINE	18a	OF	FORM	3)

NAME OF COMMITTEE (In Full)		
Arkansas Red State	e Association	
NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
None	Sumpower margerial growingspectured	รายการสูงการสุดเหตุ รูบเกษตุลงการการการสูงการสุดเหตุลงการสุดเหตุลูกมายสุดเรตก
BREAKDOWN OF TRANSFER RECEIVED		gar madagasaka kipadan sagasaka magaran nga sawagaran nga dinangka sanagkasan nga sawag
i) Total Administrative		Stanton Control of the Control of th
		A manufactured and it is the second and the second
ii) Generic Voter Drive		to the second second discovered the second discovered to the second discovered discovered discovered to the second discovered discovered discovered discovered discovered d
		Contract the second state of the second seco
iii) Exempt Activities		รู้ เมื่อสารสำหรับสารสิติเกาส์เลาสมัยเครียมการสิติเกาส์เลเสน
iv) Direct Fundraising (List Activity or Event Id	lentifier)	
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b)	- En exilicacidas of historicans and historical historical and his	\$ 200 C
		น้ำและเพื่อการเหมียนเลดีเลอกสิเทคหน้า และที่การเหมียน แล้วและเรื่อน เลดียน เกลียน เลดียน เลดียน เลดียน เลดียน
c) Total Amount Transferred For Direct Fund	raising	อาการเกิดแบบร้องการจังโดการก็จากสารเสียงเกรียนการก็จากเกิดแบบร้องการก็จากเกิดแบบร้อง
v) Direct Candidate Support (List Activity or 8	Event Identifier)	
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a)		
	demonstration in lance extense bounds and and translation of the section of the s	
b)	- Programme with most describe and describe and describes	9 L External
		A second three sufficients of the second transfer of the second transfer of the second transfer of the second
c) Total Amount Transferred For Direct Cand	didate Support	
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vi) Public Communications Referring Only to	Party (Made by PAC)	and tree to an Theoretia union of the street on the content of
TOTALS I	FOR BREAKDOWN OF TRANSFER RECEIVE	-
TOTAL This Period (Administrative)	And the second second second and	1
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TOTAL This Period (Generic Voter Drive)	นี้ ก็พาการ์คนาดตัวการสำนักของในเกร	ndres A to combinate desirable to collected
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TOTAL This Period (Exempt Activities)	() Secretarios de la companya () and	การ์สเตอบที่ การจะเรื่องเการที่ กรรมแบบโดยเการ์เก็บเกาะเกี่ยงการเก็บ
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TOTAL This Period (Direct Fundraising)	Secretary and the	d Bern Growt Brend Brend von Stern & Dorn Franch
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TOTAL This Period (Direct Candidate Support)	- Carolina	องโดยสมัย โดยเหมือนการสมัยการสมัยการสมัยการสมัยการสมัยการสมัยการสมัยการสมัยการสมัยการสมัยการสมัยการสมัยการสมัย
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TOTAL This Period (Public Communications Referring	ig Only to Party)	and the control of the state of the control of the
TOTAL This Period (Total Amount Transferred)		
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## SCHEDULE H4 (FEC Form 3X)

## DISBURSEMENTS FOR ALLOCATED

EDERAL/NONFEDERAL AC	TIVITY		<u></u>
		· · · · · · · · · · · · · · · · · · ·	FOR LINE 21a OF FORM 3X
NAME OF COMMITTEE (In Full)	oll And the	. 1 % -	
	State Associa	14100	<u> </u>
. Full Name (Last, First, Middle Initial)			Allocated Activity or Event:
Mailing Address	<del></del>		Administrative Fundraising Exempt
Mailing Address			Voter Drive Direct Candidate Support
City	State Zip Code		Public Comm (ref to party only) by PAC
Purpose of Disbursement:		gasangananganen	Allocated Activity or Event Year-To-Date
Administrative			Investment have the reference the self-to a language of the self-to a
Activity or Event Identifier:		Category/	S. Martin 1 E. R. S. G. S. A.
		Type	Date
FEDERAL SHARE	+ NONFEDERA	L SHARE	= TOTAL AMOUNT
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. Full Name (Last, First, Middle Initial)			Allocated Activity or Event:
			Administrative Fundraising Exempt
Mailing Address	•		Voter Drive Direct Candidate Support
City	State Zip Code		Public Comm (ref to party only) by PAC
	·		Allocated Activity or Event Year-To-Date
Purpose of Disbursement:		describerational	ในการนำเพลงที่ในจะเก็บและโดยเลดีมละ ก็ไหล่วดก็นอนเป็นกระนำในกระนำ เป็นการนำเพลงที่ในจะเก็บและได้ละเลดียนกระนำ
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. Full Name (Last, First, Middle Initial)			Allocated Activity or Event:
			Administrative Fundraising Exempt
Mailing Address			Voter Drive Direct Candidate Support
City	State Zip Code		Public Comm (ref to party only) by PAC
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TOTAL This Period (last page for each line	e only)(Federal share to 21(a)(i) a	nd NonFederal si	
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## SCHEDULE H5 (FEC Form 3X)

## TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

	PAGE	: /	OF	i	
1	FOR	LINE	18b OI	FORM	3)

NAME OF COM	MMITTEE (In Full)			A
Acki	ansas Red St	ate Assoc	ciation	
NAME OF A	W	DATE OF RECEIPT		TOTAL AMOUNT TRANSFERRED
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## SCHEDULE H6 (FEC Form 3X) DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

PAGE	j	OF	1	
FOR LINE	303	OF	EOBM	3

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## SCHEDULE L (FEC Form 3X) AGGREGATION PAGE: LEVIN FUNDS

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## SCHEDULE L-A (FEC Form 3X) ITEMIZED RECEIPTS OF LEVIN FUNDS

Use separate schedule(s) for each category of the Aggregation Page

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## SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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